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Thereby certify that this paper pgs. is being facsimile transmitted to the USPTO on the date shown. Date: The LA Company paper pgs. Is being facsimile transmitted to the USPTO on the date shown.

BY FAX: 1 (571) 273-8300 Tel Aviv, February 15, 2007

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 USA

Re: U.S. Utility Patent Application entitled:

REDUCED KEYBOARDS SYSTEM USING UNISTROKE INPUT AND HAVING AUTOMATIC DISAMBIGUATING AND A RECOGNITION METHOD USING

SAID SYSTEM

Inventor: Daniel SURAQUI

Application No.: 10/706,031

Filed: November 13, 2003

Our Ref.: 1763

Dear Sirs:

Enclosed please find the following documents for the above-captioned patent application:

Issue Fee Transmittal Form PTOL-85 (1 page);

2. Credit Card Payment Form PTO-2038 in the amount of \$1,000.00 to cover the Publication and Issue Fees and 10 copies of the patent (1 page).

Respectfully submitted

Edward Langer Patent Attorney Attorney for the Applicant Registration No. 30,564

Correspondence Address: Shiboleth, Yisraeli, Roberts, Zisman & Co. 1 Penn Plaza - Suite 2527 New York, NY 10119

394234-v1

Ezra Baris Ami Barley Lior Ben Droi Ofer Ben-Yehuda Ye ela Chemdar Keren Diner Efrai Elas Yuval Esteron Amir Fisher Yael Priedman Inbal Hava Miriam Heller Lidje Roni Hofugu Yossi Koren, CPA Rov Kuhovsky lui Leshem Tirza Less-Gross Ayala Levy Dr. Nir Mendel Ehud Merary Yaron Meyer Fynl Mizrahi Ruth Offek Shlomir Ophir-Harel Hadas Raccah Dana Raucher Andrew Rosen

Andrew Rosen
Gil Rosenberg
Orna Schwartz
Maya Sidis-Vager
Yael Slekierski (Arad)
Shaun Shirman
Ifat Wald-Yaar
Huuna Yanovsky

* Admitted also in New York

** Admined also in Pennsylvania

ISRAELI-CHINESFLEGALDESK Bank Of China Tower, 200 Yincheng Road Central, Pudong, Shanghai 2001 20, Phone: 86-21-5037-2668 (Ext. 217) Fax: 86-21-5037-2178, Mobile. 86-136-0163-2314, E-mail: Michellerzhori@zhonglun com (In Cooperation With The Zhong Lun Law Firm) PAGE 1/3* RCVD AT 2/15/2007 9:53:10 AM [Eastern Standard Time] * SVR: USPTO-EFXRF-3/1 * DNIS: 2738300 * CSID: * DURATION (mm-ss): 01-40

PART B - FEE(S) TRANSMITTAL.

Complete and send this form, together with applicable fee(s), to: Mail

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